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ABSTRACT

The aging of New York State's population poses both a challenge and an opportunity for the major institutions of society. The challenge facing educators is to develop a comprehensive strategy to mobilize the capacity of the educational system to address the multiple needs of an aging population in the context of existing social and economic conditions. This paper presents six major policy directions for the coordination and development of programs for the elderly: (1) provide education and training opportunities for older persons; (2) enhance the coordination of services for the elderly; (3) involve the elderly as active participants in society; (4) educate students at all levels about aging; (5) train needed professional, paraprofessional, and informal service providers for older persons; and (6) increase the research potential of postsecondary institutions to address the needs of the elderly. The policy statement suggests a number of program options to implement each policy direction. These recommendations address the need to establish a New York State Clearinghouse on Aging, a loan and fellowship program in gerontology and geriatrics, special state aid for services to the elderly, and development and dissemination of model programs for the elderly. Appendixes to the report provide statistics on the elderly population; list major organizations, geriatric and gerontological centers, and Area Agencies on Aging that are part of the service network for older persons; and give references. (KC)

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EDUCATIONAL ELEMENTS OF A COMPREHENSIVE STATE POLICY ON AGING

This policy statement was adopted by the New York State Board of Regents on November 20, 1986. It reviews current growth of the elderly population and examines its impact on social institutions, particularly schools, colleges and cultural institutions. Educational policies are proposed to meet the needs of the elderly within the context of a comprehensive State policy. Several program options are presented to mobilize the research, instructional and service capacities of the educational system in order to respond effectively to the aging of New York State's population.

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FOREWORD

The aging of New York State's population poses both a challenge and an opportunity for our major institutions. Not only will the number of elderly persons requiring services continue to increase – persons 60 years or older are growing faster than any other age group – but the demand will require increased diversification in those services.

The aging process is often associated with discrimination in the job market, increasing need for services, particularly health and health-related services, and increasing costs with decreasing disposable income. Although the elderly need to remain socially and physically active, aging also typically increases inactivity. Such inactivity is detrimental not only to older persons but also to the community as a whole. The aging of New York State's population presents the challenge of mobilizing resources on behalf of the elderly, as well as the opportunity to develop ways in which the elderly can play vital roles in strengthening our institutions. This paper analyzes the implications of these changes for the educational community.

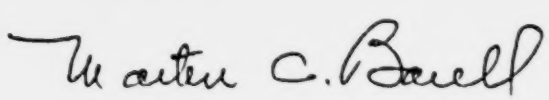
The challenge facing educators is to develop a comprehensive strategy to mobilize the capacity of the educational system to address the multiple needs of an aging population in the context of existing social and economic conditions. The proposed strategy is based on three capacities of the State's educational system: research, instruction, and service.

The paper presents six major policy directions for the coordination and development of programs for the elderly:

- **Provide education and training opportunities for older persons.** Any effort to develop the role of the elderly as active participants in society should include increased access to education and training. Priority must be given to the retraining needs of the "young-old" and the coping skills needed by the "older-old" as well as their need for leisure-time activities.
- **Enhance the coordination of services for the elderly.** A mechanism has been established to coordinate policy development in agencies responsible for the long term needs of the elderly, the Long Term Care Policy Coordinating Council. However, there is a need to enhance coordination among agencies able to respond to the State's aging population. The State Education Department should strengthen links with the State Office for the Aging and other agencies to assist in developing a comprehensive State policy on aging.
- **Involve the elderly as active participants in society.** There is a growing segment of the elderly population who have the potential to actively participate in family and community life. Schools, colleges, and cultural institutions should be leaders in using the potential of the elderly in mainstream activities.
- **Educate students at all levels about aging.** The ability of society to mobilize its resources to help the aging population depends upon increased public awareness of the aging process. The young as well as the elderly must learn more about aging. The educational process should begin early and must emphasize the role of the family in caring for the elderly.
- **Train needed professional, paraprofessional and informal service providers for older persons.** With increased life expectancy and diversification of the elderly population, there is a need for increased sophistication in the training of professional, paraprofessional and informal service providers for the elderly. A key contribution is to improve the skills of current service providers and train new practitioners as needed.
- **Increase the research potential of postsecondary institutions to address the needs of the elderly.** Colleges and universities must continue to direct their research efforts to expanding our knowledge of aging. Such research should not be limited to the medical sciences; it should include practical inquiry into service models, especially concerning the transfer of

technology, financing of services and personal growth and coping skills of the elderly. Another service that the educational system can perform is to disseminate information about research findings, the needs of the elderly, and models proven successful to meet those needs.

The policy statement suggests a number of program options to implement each policy direction. These recommendations address the need to establish a New York State Clearinghouse on Aging, a loan and fellowship program in gerontology and geriatrics, special State aid for services to the elderly, and development and dissemination of model programs for the elderly. The Appendix lists major organizations, geriatric and gerontological centers and Area Agencies on the Aging that are part of the service network for older persons.



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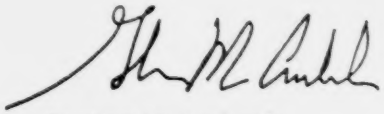

Gordon M. Ambach
Commissioner of Education

CONTENTS

I. The Aging Society 1
II. Education Policy Issues 3
III. Framework for Action 5
IV. Program Proposals 7

Appendices:
A. Statistical Tables on Characteristics of the Elderly 13
B. Sample of Ongoing Programs for the Elderly 25
C. Listing of Advocacy Organizations, Centers, and Agencies 29
D. References 37

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EDUCATIONAL ELEMENTS OF A COMPREHENSIVE STATE POLICY ON AGING

I. The Aging Society

One of the most significant demographic trends in New York State – indeed, in the nation as a whole – is the aging of our population. The elderly population – persons 60 years or older – is growing faster than any other age group, with the greatest increases occurring in the over-75 age group. From 1970 to 1980, New Yorkers aged 60 and older increased by 6 percent (almost 179,000 persons), while the State's under-60 population actually decreased by 329,000 persons. The 6 percent growth rate for New Yorkers 60 and over masks an even higher rate for the oldest cohorts: 15 percent for those 75 to 84 years of age and 44 percent in the 85 and older age group. As a result, the elderly represented 17.0 percent of the population in 1980 compared to 15.5 percent in 1970.

With an elderly population of over 3 million in 1980, New York State ranked second only to California's 3.4 million. Among the four states with the largest population aged 60 and over, only Florida with 23 percent had a larger proportion of its total population over 60. Today New York State's over-60 population is estimated at 3.2 million, and it comprises 8.4 percent of that group nationwide.

Projections by the New York State Department of Commerce indicate that the trend will continue through the year 2010. During the next three decades, the above-60 age group in New York is expected to grow at 15 times the rate of the rest of the population. As a result, by the year 2010, persons 60 and above will constitute over 21 percent of the State's population in contrast to 17 percent in 1980 and 13 percent in 1950. Furthermore, the impact of these processes will further accelerate after 2010 as the "baby boomers" of the 1950's and 1960's reach retirement age.

The implications of these major demographic trends are far-reaching for New York State. Not only will the number of elderly persons requiring services continue to increase, but they will be an increasing resource for our society. The elderly comprise a group ranging from individuals with good health, adequate incomes and extensive social networks, to individuals who are poor, have chronic illnesses or disabilities and live in isolation. The elderly do not comprise separate groups having distinct characteristics but rather a continuum of persons with a variety of living conditions, family status and health characteristics.

Society's success in educating its people, providing jobs and extending life has defined an emerging group of the "young-old" – individuals who have better education, better health and more economic security than past generations of the elderly. These persons are functioning better for a longer period of time, and are retiring earlier. For example, the percentage of employed men over 65 in 1900 was 63; now it is only 20. A whole new phase in the life cycle has been created, a time when many persons over age 60 free of debilitating health conditions, are capable of continuing activities outside the work force and require less care than their counterparts a generation ago.

Growth of the "young-old" population has been accompanied by an increase in the number of older persons who require progressively more intense supporting care as their capacity for self-support decreases. This is the group having the greatest need for a variety of services. According to the proceedings of the first Brookdale Foundation Conference on Aging in America, empirical studies indicate that the major source for this care is the family. Indeed, the family continues to be the major source of personal care for all the elderly, even though the problems experienced by families in their roles as caregivers sometimes results in the breakdown of the family support system.

Changes in family composition and the roles of family members also have operated to reduce the ability of families to be major providers of care. Two major factors are an increasing proportion of women (the traditional providers) who are entering the labor force, and the high proportion of families headed by single women. According to the State Office for the Aging, persons in professional or managerial positions are more likely to work and provide care at the same time than are individuals in other occupations. Since the majority of women hold nonmanagerial and nonprofessional positions, this further weakens family resources available to care for the elderly.

Despite the decreasing role of the family, according to the New York State Office for the Aging report on "Family Caregiving and the Elderly," family members remain

the principal providers of personal assistance to elderly people. This fact is confirmed in a recent report by the National Center for Health Statistics. Of the 26.3 million Americans over age 65 who are not in hospitals or nursing homes, 18.3 million, or 70 percent, live with relatives, friends or others, while 8 million live alone. The report also indicates that children play an active role in the lives of elderly persons living alone or with others. Of those aged 65 or over with children, 23.4 percent see their children daily, 40.3 percent see them weekly, 16.2 percent monthly, 17.5 percent yearly, while 2.6 percent never see their children. The preliminary evidence shows that the majority of elderly persons see or talk with family frequently.

The educational system must enhance its efforts to support the role of the family in caring for older individuals. Filial responsibility may include the need to provide physical care and financial assistance for older relatives while in other situations the primary need will be for a warm, caring relationship. Educational institutions should provide training to help prepare youth and adults fulfill their responsibilities to the older generation. This training should recognize the need to understand and discuss ways to meet the social and emotional needs of all family members, including the elderly family member. It should prepare families so that they can identify these needs, and assist them in providing services. Family care providers, especially, should be made aware of support services available in the community and be urged to use them.

The independence of the elderly, as well as the family, social and economic structures on which they depend, is the key issue. The challenge for society is to mobilize the resources of families, neighborhoods and community institutions to support the independence of the elderly and to address needs that arise when their independence is no longer feasible. While the needs differ in degree from person to person, they are comparable in kind: most elderly persons require health maintenance services, financial security, and continued personal development.

Health Maintenance Services

Widespread medical care, public health, and improved nutrition have increased longevity; yet, health maintenance continues to be problematic for the elderly, especially those who are poor. While a large segment of the elderly is healthy, older people are particularly vulnerable to chronic health conditions which limit their ability to perform basic activities and make them dependent on others for assistance. With the oldest of the old growing at a faster pace than any other segment of the population, the increasing need for care-giving structures is a growing reality in the State's health system.

The cost of financing health care for the elderly has also increased. Nationwide, Medicare and Medicaid payments for the aging increased significantly from 1980 to 1984. While Medicare payments increased from $35.6 billion in 1980 to $62.7 billion in 1984 (76.3 percent), Medicaid payments increased from $23.2 billion in 1980 to $34.0 billion in 1984 (46.6 percent). Medicare and Medicaid payments for the elderly in New York State also increased during that period by $2.1 billion, or 63 percent and $2.2 billion or 50 percent, respectively. The increasing financial burden for health maintenance has had to be assumed by the elderly themselves. According to the New York State Office for the Aging, per capita out-of-pocket health care expenditures of the elderly have increased from $698 in 1977 to $1,683 in 1985. As a percentage of mean income, those per capita health care expenditures have increased from 12 percent in 1977 to 16 percent in 1985; by 1990, they are projected to increase to $2,395, or 18 percent of the mean income.

These significant expenditures show a growing recognition by society that health maintenance is a core issue. Financial, housing and transportation needs are magnified when elderly persons are not in good health. Similarly, good health is essential for the elderly to benefit from financial, recreational and educational opportunities.

Financial Security

Financial security is a growing problem for the elderly. In 1981, the median income for New York families headed by a person under 65 was $21,072; for families headed by persons aged 65 and over it was $15,141, or 28 percent less. For unrelated individuals the difference was even greater, $10,268 against $4,935, a 52 percent drop. These figures show a significant loss of income when persons reach age 65.

As in any population group, there are differences of income among the elderly. But lower income groups predominate among the elderly significantly more than among the younger adult population groups. Sex and ethnic diversity are also related to poverty among the elderly: it is more likely that the elderly who are below or at the marginal poverty line are females and minorities. For example, in 1983 approximately 76.3 percent of all elderly households below the poverty level and 72.3 percent of all households in marginal poverty were headed by women.

Life is particularly difficult for the elderly poor. In New York State there were, in 1983, about 318,538 per-

sons aged 65 or older living under the poverty line.* This was 15 percent of the State's 65 or older population. As with other issues of aging, the situation deteriorates with advancing age: 14 percent of persons 65-74 are below the poverty line, while the figure for those 75 and older is 15 percent.

The financial condition of many elderly people has improved over the years with the availability of Social Security benefits. In 1984, the average annual Social Security benefit was just over $4,800, up from $1,214 fourteen years ago. But even with Social Security assistance, many elderly persons face serious financial hardship: approximately one-quarter of Social Security Retirement beneficiaries – 700,000 New Yorkers – rely on Social Security payments as their primary source of income.

Whether supported by their own resources or by government subsidies, the elderly rely on income or income supports that have an eroding purchasing power. At a time when their income is fixed or decreasing, the elderly need to spend more of it on expensive items such as medical care. For example, elderly persons have a longer average stay in hospitals, make more frequent visits to physicians and spend more on medication than do other adults – while the medical service price index is currently increasing at an annual rate of over 6 percent. As a result, increasing medical costs erode the financial base of elderly persons more than that of younger groups.

Financial factors affect other key services such as housing and transportation. For older adults, those needs become more specialized and expensive as their income decreases and their need for care-giving services increases. Obviously, the capacity of the elderly to meet their changing needs varies inversely with the availability of disposable income.

Personal Development

With improved health care, later adulthood has become a time of life when the elderly have new opportunities to take on active and productive roles. The capacity and desire to do so is related to the increased educational background of the "new" aged compared with that of the "old" aged. Increasing opportunities for continued personal growth benefits not only the elderly individually, but also society as a whole by reducing their need for health services, increasing their contribution through volunteer and community service, and expanding the number of such persons in productive employment.

For many elderly, the transition to retirement involves uncertainty about their new, usually "noneconomic" roles. Studies have indicated that earlier informed retirees have the most positive adjustment to these new roles. This suggests the need for careful, systematic preretirement planning to "smooth" the transition. Efforts by employers and labor unions, as well as traditional educational institutions are beginning to address this need.

Greater availability of leisure time to the elderly population is an important resource. A critical function of our educational institutions will be to identify and define the activities in which the experience and skills of the elderly can be engaged, for the continued development, dignity and well being of elderly persons, as well as for the enhancement of contributions to others.

II. Education Policy Issues

A comprehensive State policy toward the elderly is shaped by the needs of people 60 and older. Biological, social and economic factors also define a broad range of circumstances which older persons face for the first time. These needs are due largely to deficiencies in health, finances, and personal development. Stereotypes and negative attitudes are also responsible for the problems of the elderly. In this context, the key educational policy issue is how education as a process – and educational institutions as a system – can address those needs. The key question is: What needs of the elderly can be met, directly or indirectly, by mobilizing the resources and expertise of the educational community? The answer depends on the capabilities and activities of the entire system, including elementary and secondary schools, colleges and universities, cultural institutions, rehabilitation facilities, and related educational agencies.

Traditionally, education has been viewed as youth-oriented, providing an instructional sequence to prepare students for citizenship and employment. The continuum from kindergarten to graduate and professional schools historically has served persons from age six to the late 20's. This still is the main function of the educational system. Nevertheless, this function has undergone a significant transformation. The instructional continuum has lengthened in response to the needs for earlier education for children and for retraining work-

* Federally defined minimum yearly income below which a family cannot provide itself with minimally adequate food, clothing, shelter and other basic necessities. It varies according to family composition. According to the 1980 Census, for a person 65 or over living alone it is $3,479; for a 2-person household headed by an individual aged 65 or over it is $4,387. Bureau of the Census. 1980 Census of Population, Characteristics of the Population, General Social and Economic Characteristics, New York, Appendix B: Definitions and Explanations of Subject Characteristics, p. B-22 and B-23.

ers, and the demand for more sophisticated research and professional expertise. Services have been expanded to assure access to the disadvantaged, the handicapped, and adults who wish to continue learning through longer periods of their life.

New York's public schools have a long history of educating newly arrived immigrants and other adults needing instruction in language and computational skills. Subsequently, these institutions have provided adults with essential job training. Postsecondary education institutions also have responded to emerging demands, and today they offer a variety of continuing education programs for adults of all ages. Access to traditional programs has been broadened by offering adults the same postsecondary aid as younger students. Libraries and museums also have expanded to meet the needs of older learners. These institutions provide artistic and cultural opportunities as well as information about jobs, job-search strategies and training opportunities. Libraries also have begun to work with literacy organizations to help adults learn to read, thus aiding their entry into the work force.

Adult education is now a standard mission of our educational institutions. The challenge is how to use the system's capacity to serve the elderly. Adult education has responded over the years to emerging needs of working adults; they must do the same for the elderly. Initiatives to serve the elderly are already in place in local school districts and postsecondary institutions:

- Some districts have a grandparents' day when adults attend school with their grandchildren;
- Other school-based activities use the services of talented senior citizens as mentors for high school students;
- Senior citizens have free tuition or discounts for school-based programs;
- School-community partnerships offer trained staff who can provide advice on health and housing services for the elderly, while the school district provides educational programs;
- Specific efforts are made to involve senior citizens in nursery schools and kindergartens for the purpose of establishing intergenerational ties and replicating the extended family structure in the classroom;
- Many libraries offer reading and study programs on topics of special interest to the elderly and provide advice on health, legal, and social service questions;
- Some libraries offer adult education, special literacy, and bilingual programs for the elderly and consultation for tax and investment purposes;
- Many older students can enroll tuition-free in the regular continuing education and graduate and undergraduate courses at colleges and universities;
- Schools serve as sites for congregate nutrition programs; and
- School-based centers enable senior involvement in community activities.

New York's aging population poses an opportunity not only to mobilize existing resources, but also to clarify ways in which the elderly themselves can strengthen our existing institutions. Goals and strategies must be established to mobilize existing educational resources as part of a comprehensive State policy to meet the needs of the elderly.

In defining educational policies and programs for the elderly, their experience, qualifications and prospective needs must be taken into account. Individuals having a higher level of education are more likely to participate in educational programs than those having fewer years of education. Major increases in the number of older people involved in educational pursuits can be expected in the future. In 1983, only 17 percent of older New Yorkers had four years or more years of college. When the baby boom generation reaches the third quarter of their lives, almost one-third will have four or more years of college and almost one-half will have some college education. The most educated generation will likely seek continued education and retraining; thus, educational opportunities should be made available to them. On the other hand, educational institutions will also need to reach out to other elderly groups who, having a greater need of services, might not readily seek educational opportunities.

Such an education strategy will be based on the system's three basic capacities: research, instruction, and service. To implement the strategy, the Regents propose six major policy directions:

A. Provide education and training opportunities for older persons

Elementary, secondary and postsecondary agencies should continue to enhance access by the elderly to available educational programs. Priority should be given to programs that address the retraining needs of the "young-old," the coping skills needed by the "older-old," and their need for leisure-time education. New delivery systems must involve coordination with other services and the use of robotics, computer technology and electronic media. Neighborhood institutions, such as libraries, that are easily accessible during the day should increase opportunities for personal development and resource sharing by expanding their programs for the elderly.

B. Enhance the coordination of services for the elderly

Many services currently available to the elderly are offered in an uncoordinated manner that discourages participation. The State Education Depart-

ment should strengthen links with the State Office for the Aging, other agencies serving the elderly, and senior advocacy organizations to develop a coherent State policy and the required education support for that policy. Current efforts to use high technology in long-term care, to integrate aging-related issues into school curricula, and to develop school-based service systems should be emphasized.

C. Involve the elderly as active participants in society, particularly as resources for schools

The most important need of the elderly is to participate actively in educational, civic and cultural activities, as volunteers and as paid workers. Educational and cultural institutions should utilize the unused potential of the elderly in mainstream activities. The State should provide incentives for schools, libraries, and businesses to develop models that can be replicated.

D. Educate students at all levels about aging

Society's capacity to deal with the aging of America's population and to eliminate stereotypes about aging means that schools must develop an early awareness of the aging process and a responsive capacity in students. Curriculum developers and teacher educators should integrate aging-related material into elementary and secondary curricula and teaching practices.

E. Train needed professional, paraprofessional and informal service providers for older persons

The increasing need for a variety of services to the elderly requires increasingly sophisticated training for professional, paraprofessional and informal providers. Public school, BOCES and postsecondary curricula should respond both in traditional biomedical specialties, and in services addressing financial, housing and transportation needs.

F. Increase the research potential of postsecondary education institutions to address the needs of the elderly

Programs to serve these needs must be based on research that relates program efforts to expected results. More research is needed on health-related issues, including mental health; but it should not be limited to the medical sciences. It should include practical inquiry into service models of technology transfer, financing of services and personal growth and coping needs. Also required is increased dissemination of appropriate information and models.

III. Framework For Action

The challenge posed by the growing numbers of older citizens involves economic, housing, transportation, health and personal growth needs of the elderly. The emergence of a group of people capable of longer participation in society, – the "new aged" – generates needs ranging from retraining for productive employment to opportunities for participation in civic, educational and recreational activities. Increases in life expectancy result in growing numbers of the "older-aged" who must rely on family-based and institutional mechanisms for their basic care needs. At the same time, there is a need for all – young and aged alike – to learn about the biological, social and economic aspects of aging.

Our educational system must mobilize its resources to serve the needs of the elderly. With that commitment, the Regents support six policies directed toward coordination and development of programs for the elderly.

A. Provide education and training opportunities for older persons

Inadequate knowledge about the aging process may impede the ability of the elderly to cope with economic, health and personal needs. Frequently, they are faced with unsolved problems and unmet needs resulting from insufficient knowledge about financial planning, preventive health care and nutrition, and available services. As a result, many older persons believe they cannot remain useful through paid and volunteer activities.

Like every age group, the elderly never outgrow their need to learn, grow and develop. Our educational system must foster the intellectual stimulation of the elderly population and an understanding of the aging process:

- Educational institutions must recognize the dignity, self-worth, and talent of the elderly;
- Schools and universities must enable the elderly to participate actively in all of their programs;
- The elderly, especially the "young-old," must be given the opportunity to develop new skills which will enable them to take advantage of existing employment opportunities;
- Opportunities should be provided to train or retrain older individuals for changing employment opportunities;
- Libraries should increase services to the elderly, encouraging formal and informal study and discussion groups, promoting intergenerational programs, and providing appropriate educational reference materials; and
- Education opportunities should be provided to assist the elderly to participate in personal fulfillment activities.

By providing such opportunities, educational and cultural institutions can substantially improve the physical, mental, economic and social conditions of the elderly.

B. Enhance the coordination of services for the elderly

Educational services to the elderly must be part of a comprehensive delivery system. Such services are, at present, provided by a variety of agencies, on a piecemeal basis. This wastes resources and inhibits effective responses to the diverse needs of the elderly.

Developing responses to the needs of the elderly population requires coordination of the resources and activities of many public and private organizations. The State Office for the Aging is responsible under Title III, Part A, Section 305 of the Older Americans Act and Article 19 J of the Executive Law for the development of a comprehensive system of care for New York's older population.

The Long Term Care Policy Coordinating Council (LTCPCC) was convened by the State Office for the Aging to coordinate long term care policies and programs for the elderly. The LTCPCC consists of such agencies as the Departments of Health and Social Services, the Offices of Mental Health, Mental Retardation and Developmental Disabilities, Division of Housing and Community Renewal, and the State Education Department.

While these efforts are substantial, there is still a need to further coordinate long-term care and other activities impacting on our aging populations. The Regents have taken a step in this direction by developing a comprehensive policy defining the role of education in serving older persons. This policy, together with similar efforts by other agencies, should be part of the development of the next four-year State Plan by the State Office for the Aging.

At the local level, the principal need is to enhance access by the elderly to a broad range of programs and services. The Regents urge schools and libraries to work closely with local Area Agencies on Aging and senior advocacy groups to assure availability of a comprehensive range of services to the elderly, especially in community renewal areas. Area Agencies on Aging, which are part of the network established under the Older Americans Act of 1965, are advocates of the elderly, administer and coordinate service programs, provide information and assist with benefit programs. Schools and libraries are equipped to help the statewide Area Agencies to develop comprehensive, community-based service delivery systems. Education and library systems use their special expertise to serve the elderly needing comprehensive services and assure delivery of services.

C. Involve the elderly as active participants in society, particularly as resources for schools

Older persons have many accumulated skills, knowledge and experience; they are real human capital. Society however, has not done enough to use them as a resource. Discrimination against the elderly has excluded them from active participation in the labor force and community services. At a time when the economic and demographic changes faced by the nation require that all resources be used efficiently, discrimination against the elderly must cease.

The elderly must be encouraged to pursue a wide range of civic, cultural, educational, and recreational activities, as volunteer and as paid workers. There is also a need to develop training and information programs to ensure that local decision makers are aware of the potential of older persons to participate in these activities. Schools, colleges and cultural institutions should develop pilot programs to maximize the potential of the elderly. Examples would include their participation as part-time instructors in adult education programs, as tutors, advisers, day care and after-school staff, and in other intergenerational learning programs.

D. Educate students at all levels about aging

Society's ability to mobilize its resources to support the aging population is dependent on increased public awareness of the aging process. There is a need to inform citizens about the biological, psychological, and social aspects of aging, and the realities involved in the aging process. Stereotypes and negative attitudes towards aging must be eliminated. The process should begin in the early grades. To ensure that children develop an understanding of the aging process and a capacity to deal with it, age-related material should be incorporated in our elementary and secondary curricula, as well as school and public library collections. To provide continuity, secondary school students should be encouraged or required to provide community service in housing facilities for the elderly, senior citizens centers, and nursing homes. Colleges or departments of education should also train potential teachers to be aware of issues pertaining to the well-being of the elderly.

E. Train professional, paraprofessional, and informal service providers for older persons

With increased life expectancy and diversification of the elderly population, the demand for professionals, paraprofessionals, and informal service providers trained in the care of the elderly has increased.

Training programs for formal and informal service providers of the elderly must be expanded to address current and future needs. Service providers must keep abreast of recent research on aging and the latest technologies. Educational institutions must expand their course offerings in gerontology and geriatrics to ensure

a supply of professionals and paraprofessionals trained in the care of the elderly. According to Dr. Robert Butler, in his Pulitzer Prize winning book, *Why Survive? Being Old in America*, geriatric and gerontology courses are especially needed in the core curricula for physicians and nurses.

There is a wide variety of professions – e.g., medicine, nursing, physical therapy, home health services, social work, and law, – involving contact with older persons. Instruction about older people as learners and about effective instructional processes are important in training instructors for the elderly. Such training should lead to greater awareness of the needs of the elderly and increased capacity to serve them.

F. Increase the research potential of postsecondary educational institutions to address the needs of the elderly

By its very nature, research is the responsibility of postsecondary institutions. Since passage of the Older Americans Act of 1965 and the White House Conference on the Aging held in 1971, considerable research has been conducted. Much of the research however, has been conducted in an uncoordinated, unsystematic fashion. There is a real need to ensure compilation and dissemination of research findings to avoid duplication of effort and to develop a comprehensive body of knowledge. Our colleges and universities must coordinate their research while they continue to direct their efforts towards expanding the public knowledge of the aging process. Postsecondary research must continue to focus on the biological, psychological, health, housing, financial and social needs of aging. It must focus on the differences in health conditions, life expectancies and other variables among socioeconomic, ethnic and racial groups as well as between sexes. It must also increase knowledge about the impact of physical, perceptual and attitudinal changes on the elderly, effects of training programs on older participants, impact and effectiveness of pre- and postretirement education, and effective teaching methodologies for the older person. It should also inquire into models that address the financial, personal, coping, self-esteem and self-actualization needs of the elderly. Intergenerational contact between children and the elderly must also be evaluated.

Federal funds are needed for long-term planning. They are needed for research to determine if the existing delivery system meets the current needs of the elderly population, if delivery systems can be made more accessible, efficient and cost-effective, and if services can be expanded to meet future demands. The private sector should also ascertain ways in which technological resources and innovations may be used to enhance the quality of life for the elderly. Such efforts should target adapting existing technologies such as the media and robotics, to reach the elderly, (particularly those who are isolated due to location, economic, or physical problems) and on developing new technologies.

IV. Program Proposals

The Regents policy directions provide a framework for developing education programs as part of a comprehensive State policy. The major strategy should be mobilization of the capacities of the educational system to address the multiple needs resulting from growth of an aging population. Because additional public funding sources may not be readily available, existing resources must be targeted or possibly redirected to support program initiatives. Some of these proposals are new, while others build on existing models. Some will be accomplished under the leadership of the educational system; others will require coordination with other service providers and the private sector.

A. Provide education and training opportunities for older persons

The capacities of our schools, universities and cultural institutions must be directed at fostering the personal growth of our elderly population. To achieve this goal, our educational system must increase the availability of programs that offer adult literacy programs, train older populations for new careers, and increase the ability of younger populations to cope with changes.

The Regents propose various incentives to encourage schools, colleges and other cultural institutions to develop special programs to serve the developing needs of the elderly:

1. **Special State aid for services to the elderly.** To ensure full participation of the elderly in community life and to increase their access to educational opportunities, State aid should be made available to designated educational institutions to assist them in serving the needs of the elderly. Under this approach, such aid would be available to institutions that offer special courses and programs to citizens 55 years of age or older.
2. **Occupational training and counseling for the elderly.** Without a concerted local retraining effort, older displaced workers are likely to encounter more difficulty than younger colleagues in finding employment. Currently, several area colleges are offering academic programs, job placement and occupational retraining services to displaced workers, e.g., Genesee and Erie

Community Colleges and York College. In addition, Job Information Centers located in 13 libraries statewide provide free, individualized career and education counseling services. Unfortunately, these limited programs do not address the needs of older displaced workers. In order to provide occupational training and counseling services for a broader range of elderly workers, a State matching grant program is proposed. This program would match, on a dollar-for-dollar basis, State monies with other appropriate Federal funds, e.g., Job Training Partnership Act (JTPA), Vocational Education Act (VEA), that are currently being used to retrain older workers. Grants would be awarded to large school districts, Boards of Cooperative Educational Services (BOCES) and community colleges to administer and monitor programs on a regional basis to ensure conformity to local, regional and State priorities.

3. **Comprehensive and integrated life skills curricula for the elderly.** Older persons today are more active, educated, and likely to be exposed to multiple styles of living which they may wish to adopt at retirement. Poorly reasoned decisions can be costly; they can deplete the limited resources of people on fixed incomes. The educational system must assist the elderly by offering information on investments, housing alternatives, health, recreation, legal rights and obligations, and other essential topics. Educational institutions should develop comprehensive, integrated life skills curricula for older persons. Courses should be designed to conform to current research findings in order to assure relevance. Course offerings could include: planning processes and zoning and land use laws; investment options; health insurance planning; preventive health techniques; sports opportunities; tax and estate planning; Medicare and Medicaid planning; and low cost home improvements, including energy conservation methods. While some libraries already offer seminars and classes on many of these subjects, such services can be expanded to include a greater number of providers and a broader range of topics. The capabilities of public broadcasting systems to reach the homebound elderly should also be explored.

B. Enhance the coordination of services for the elderly

Beyond the obvious need for specific program initiatives, there is an urgent need to coordinate existing programs to enhance effectiveness, avoid waste, and assure comprehensiveness. Such coordination requires high levels of understanding on the part of State agencies and leadership by the Governor.

The Regents propose three options to further these objectives:

4. **Commissioner's Advisory Council on Aging.** Education is a lifelong process. Therefore, it is appropriate that the Board of Regents and the State Education Department, with the support of an Advisory Council on Aging, address the continuing educational needs of the over-60 population. Such a council would assist in the implementation of a State policy for elderly education. As an alternative, this role could be assigned to the existing Adult Learning Services Council. After a comprehensive review of the needs of the elderly, and a series of regional conferences, specific recommendations could be developed. The Advisory Council would address the concern of the elderly to have more information, awareness and training in a diversity of areas, as related to maintaining their continued dignity and quality of life.

5. **Governor's Special Message on Aging.** In 1985, the Governor delivered a State of the State Message stressing a number of important and pressing topics, e.g., the State's economy and economic development. The needs of the State's elderly could be a timely topic for such a gubernatorial message in 1987. The Governor could mobilize State resources to develop a comprehensive, coordinated service delivery system for the elderly.

6. **State grants for community renewal.** To address the needs of individuals, including the needy elderly, in economically distressed areas the Board of Regents and the State Education Department have developed a program to use schools as community-based service centers. Through a system of State grants, the social, educational and health-related needs of hard-to-serve individuals would be addressed by means of school-based activities. Such grants would enhance the capacity of existing centers and allow the creation of new centers in which schools, in cooperation with other agencies (especially the State Office for the Aging and Area Agencies on Aging) would bring to those sites a range of services for the most-in-need. Such school-based programs would include human services such as nutrition programs, Gold Card Clubs for the Elderly and career counseling; academic support services to be provided on a 12-month, extended-week, morning-to-evening ba-

sis, including tutor and mentor programs, and educational services such as occupational training for the elderly. The State grants would encourage various local service providers and existing fiscal resources to cooperate and thereby avoid duplication. A governing board, composed of representatives from service providers and clients, would provide general policy guidelines and set priorities. The centers would bring the elderly to schools operating as bases for the community services, bring services to the home-bound elderly, and use the accumulated skills, knowledge and experiences of the participants.

C. Involve the elderly as active participants in society, particularly as resources for schools

Emergence of the "young-elderly" has produced a category of people who can participate actively in society after retirement. Schools and cultural institutions must act as catalysts for mobilizing these people for productive roles in society, especially in public schools. Elementary and secondary schools, colleges, universities, museums, libraries and other cultural institutions can utilize the expertise of the elderly, especially retired educators, scientists, and artists to enhance their educational programs.

The Regents propose several options to encourage schools and cultural institutions to avail themselves of these resources:

7. **Model programs for the elderly.** Schools should use the knowledge and skills of retired persons. Many school districts have programs in which the elderly work with students and contribute to their instruction and experience. To share these programs, a grant system is proposed for disseminating information about model programs. Educational agencies with special needs should be able to choose programs that meets their needs, purposes and resources. Types of model programs which could be shared include: *Retired Executives and Professional Academies*, which taps the expertise of retired corporate executives and other professionals for service in the schools; *Intergenerational Activities*, in which older persons join with students in recreational activities; *Volunteer Tutor Program*, in which retired teachers serve as tutors and role models for hard-to-serve students; and *Literacy Volunteers of New York State*, which enrolls the elderly in tutoring illiterate adults in informal settings and in learning centers operated by schools, colleges, and libraries. All of these programs could be expanded to more school districts with little additional cost.

8. **Retired educators of excellence.** Annually, the skills of many experienced teachers and librarians are lost due to retirement. Given proper incentives, many of these professionals would be willing to tutor students and to help less experienced teachers, librarians, and other school professionals to improve their skills. A Retired Educators of Excellence program is proposed to retain recently retired educators to perform the following functions: observing teachers, on a voluntary basis, and assisting in improving their teaching methods; offering in-service workshops and seminars; serving as tutors for gifted or underachieving students; helping develop materials and curricula; participating in research on teaching methods; and providing volunteer library services. These retired professionals could be particularly productive in developing outreach services to bring dropouts back to school and in providing instruction in adult education courses for the elderly. Program participation would be on a part-time basis, and participants would be paid in conformity with the requirements of their retirement plans. Awards would be made to school districts and related educational entities on a competitive basis. Initially, grants would be targeted on institutions serving communities needing improvement. All of the new programs being implemented will encourage realistic and positive attitudes about the elderly on the part of students.

9. **Phased retirement for educators.** More men and women are retiring between 55 and 65 years of age. While many wish to decrease their work load, if given the choice, they would maintain some ties to work. Not only would the blending of retirement and work be the best arrangement for many older individuals, it would allow experienced teachers and faculty members to continue their teaching responsibilities. Within our current system, there is either work or retirement, with no intermediate alternatives. Therefore, a comprehensive study of the benefits of a phased-in retirement system for educators is proposed with the view of allowing individuals gradual reductions in work. This study would be coordinated with the Phased Retirement Study, now under way in the State Office for the Aging.

D. Educate students at all levels about aging

People of all ages should learn more about aging and the elderly, their capacities and interests and should encourage their continued contribution to society. Ours is a youth-oriented society where old age is often perceived

as a time of negative change. The school curriculum presents an opportunity to reach young people at a time when knowledge about the elderly will significantly offset this sense of values on the subject.

The Regents propose two basic strategies to provide instruction and experience about aging to young students:

10. **Curricular initiatives.** The Regents Action Plan for Elementary and Secondary Education requires updating and revision of curricular materials. As part of that process, State Education Department staff should review curricula and make appropriate revisions based upon current research:
    - Department staff and the State Association of Gerontological Educators are currently working to incorporate material about the aging process in the curricula at different grade levels.
    - Gerontology and gerontological subjects will be infused in social studies, biology, health and home and career curricula.
    - Local curricula will emphasize the role of the family in the continuing care of older relatives.
    - Students will be made aware of many activities in which the elderly serve in useful capacities, demonstrate active life-styles and pursue lifelong learning opportunities.
    - New curricula will be developed to include information on the process of aging for students at all levels of education. Also, instructional materials should be reviewed and stereotypes about the elderly will be deleted.
    - The fact that many elderly individuals continue to be active, significant contributions to the arts, business and science and literature will be emphasized.
    - Special emphasis should be placed on providing training for family caregivers.

11. **Student services to the elderly.** Community service programs at some colleges and universities enable students to serve as companions or provide other services to the elderly. Building on this model, awards should be made, on a competitive basis, to high schools and colleges in order to create exemplary systems of service. This program would complement the proposal for model programs for the elderly, discussed earlier. Once a service delivery model has been developed, it would be shared with other educational institutions through the Model Programs for the Elderly (MPE) dissemination process. This would enable all school districts and postsecondary institutions to incorporate into their own programs proven practices for helping older persons.

E. Train professional, paraprofessional and informal service providers for older persons

As the need emerges, education must respond to demands for better trained professionals, paraprofessionals and informal service providers for the elderly. More emphasis on gerontology and geriatrics can improve the skills of current service providers, train new providers, and encourage students to pursue teaching careers in gerontology.

In support of these objectives, the Regents propose several incentives to recruit talented persons into service occupations and professions serving the elderly, and to update their training:

12. **Loans and fellowship programs.** By the year 2010, persons 60 years of age and above will constitute at least 21 percent of the State's population. At the same time, the body of knowledge and technology of our economy and society will increase significantly. To meet this impending need, the skills of current service providers must be updated and the fields of gerontology and geriatrics must attract talented practitioners. Therefore, additional fellowships and loan programs must be instituted. Fellowships should be awarded in increasing dollar amounts, progressing from undergraduate to graduate to post-doctoral levels for gerontology students, including part-time study for those holding teaching positions. Also, a student loan program for individuals entering the field of gerontology or geriatrics should be established in each major college, with a given percentage of a student's loan forgiven for every year of service in that capacity.

13. **Support of targeted postsecondary education training programs.** As the increasing needs of the elderly emerge, high schools, BOCES and postsecondary institutions should develop courses of study to address the range of needs. The unique contribution to be made by these institutions is the training of practitioners of services to older persons and instructors and researchers in gerontology and geriatrics. As a step in this direction, the State Education Department and the State Association of Gerontological Educators are designing an Elder Aide Curriculum to train individuals for entry-level positions working with the elderly. To provide a stimulus to the State's educational institutions, a program of grants is proposed to develop model training programs. BOCES, colleges and universities will be encouraged to develop courses in critical areas of gerontology and geriatrics, including workshops, con-

ferences and symposia tailored to the needs of service providers, and summer institutes in which the knowledge and skills of practitioners would be updated and improved.

14. **Review of licensing requirements for practitioners serving the elderly.** As more elderly individuals are kept at home, the role of informal caregivers increases significantly. There must be a division of labor between informal and formal mechanisms to improve informal care while ensuring quality. An analysis should be made of the extent to which public regulations have impeded or promoted care of older persons. This issue has already been discussed informally by the Governor's Long Term Care Policy Coordinating Council. In response, the Board of Regents and the State Education Department should review the need for licensing requirements related to the quality of long-term care for the elderly.

F. Increase the research potential of postsecondary educational institutions to address the needs of the elderly

In meeting the needs of the elderly, colleges and universities should expand their basic and applied research efforts, particularly those involving research on the biological process of aging, technology transfer, and models for the financing of services. Another possible service would be increased dissemination of information about research findings, needs of the elderly, and successful models. To promote those efforts, State incentives are needed to coordinate existing resources in specific fields and to stimulate the use of institutional funds for research and dissemination.

In this context, the Regents propose:

15. **Centers for applied research on aging.** Currently, there are several geriatric and gerontological research centers statewide. (See Appendix C.) The research focus of most centers is primarily medical, i.e., the problems and diseases of old age and aging people. The proposed Centers for Applied Research on Aging would focus on psychological, sociological, and economic aspects, as well as the medical aspect of aging. Their research would focus on critical need areas, e.g., architectural barriers, accessibility to services, technology transfers, improved service delivery models, and more involvement in planning processes. These centers, when coupled with university support, would provide substantial advances in the field of gerontology and geriatrics – and would provide opportunities to revise and develop curricula in technical specialties. Local secondary schools and community colleges would work in conjunction with the Centers to develop pilot programs in curriculum research and development areas.

16. **Regents chairs in gerontology.** Since 1964, the Legislature has funded a program of State-supported Chairs, the Einstein and Schweitzer Chairs, designed to stimulate intellectual, cultural and economic growth. The Chairs not only attract eminent scholars to academic residence in New York's colleges and universities, but also strengthen the State's position of leadership in the sciences and humanities. The scholarly products of the distinguished chair-holders serve vital national interests while adding to the global store of knowledge, and provide a strong foundation for further social and technological development across the State. In that spirit the Regents Chairs in Gerontology are proposed. The rationale for establishing such Chairs is threefold: 1) increase knowledge on aging and the needs of the elderly; 2) develop service delivery models based on these new research findings; and 3) focus attention on the national need for gerontological research.

17. **New York State data base on aging.** Considerable research has been conducted on the aging process and the needs of the elderly, but findings have not been adequately disseminated. The proposed Data Base on Aging, to be established as part of the New York State Library system, would be responsible for ascertaining what research is being conducted worldwide, and disseminating findings and information about successful models. The data base would also ensure that current research reports and publications on aging are available at the New York State Library and in all library systems. Further, it would promote a systematic campaign to increase the visibility and accessibility of geriatric and gerontological research centers in this State.

Conclusion

These program recommendations will be presented to the Governor in response to the request in the 1986 State of the State Message for the State Education Department and the State Office for the Aging "to develop a joint plan to better use the State's educational resources to serve older New Yorkers." The State Education Department looks forward to working with the State Office for the Aging and other State agencies, the State Association of Gerontological Educators and senior citizen organizations in implementing these recommendations.

APPENDIX A

Statistical Tables of Characteristics of the Elderly

TABLE		PAGE
I	Comparison of Selected Age Groups, New York State, 1940 – 2010	14
II	Comparison of Selected Age Groups, United States, 1940 – 2010	15
III	States with the Largest Population, 60 Years of Age and Older, 1980	16
IV	Years of School Completed, Persons 50 Years of Age and Older, New York State, 1960 – 1980	17
V	Medicare Program Recipients, Benefit Payments and Average Hospital Charges, 65 Years of Age and Older, United States and New York State, 1978 – 1982	18
VI	Per Capita Out-of-Pocket Health Care Expenditures of the Elderly, United States, 1977 – 1990	19
VII	Median Income of Families and Unrelated Individuals in Current Dollars by Age, New York State, 1977 – 1981	20
VIII	Percent of Population with Income Below $4,000 for Selected Categories of Age, Sex and Ethnicity, New York State, 1979	21
IX	States with Largest Number of Persons Aged 65 and Older with Income Below Poverty Level, 1980	22
X	Persons Aged 65 and Older with Income Below Poverty Level, New York State, 1979	23
XI	Indices of Medical Care Prices, United States, 1970 – 1984	24

TABLE I

COMPARISON OF SELECTED AGE GROUPS

NEW YORK STATE
1940 - 2010

AGE GROUP	POPULATION (In Thousands)							PERCENTAGE CHANGE						
	1940	1950	1960	1970	1980	1990	2010	1940-50	1950-60	1960-70	1970-80	1980-90	1980-2010	1940-2010
60-64	523	685	808	862	841	859	1,122	31.0	17.9	6.7	- 2.4	2.1	33.4	114.5
65-69	396	530	672	694	725	794	849	33.8	26.8	3.3	4.5	9.5	17.1	114.4
70-74	267	352	490	549	568	616	613	31.8	39.2	12.0	3.5	8.4	7.9	129.6
75-84	227	320	441	587	676	803	941	41.0	37.8	33.1	15.2	18.8	39.2	314.5
85 and Older	32	55	84	137	193	287	539	71.9	52.7	63.1	40.9	48.7	179.3	1,584.4

* * * \

TABLE II

COMPARISON OF SELECTED AGE GROUPS

UNITED STATES
1940 - 2010

AGE GROUP	POPULATION (In Thousands)							PERCENTAGE CHANGE						
	1940	1950	1960	1970	1980	1990	2010	1940-50	1950-60	1960-70	1970-80	1980-90	1980-2010	1940-2010
60-64	4,728	6,059	7,112	8,617	10,088	10,618	16,023	28.1	17.4	21.2	17.1	5.2	58.8	238.9
65-69	3,807	5,003	6,187	6,992	8,782	9,996	11,703	31.4	23.7	13.0	25.6	13.8	33.3	207.4
70-74	2,569	3,412	4,661	5,444	6,798	8,039	8,615	32.8	36.6	16.8	24.9	18.2	26.7	235.3
75-84	2,643[a]	3,278	4,495	6,119	7,729	10,349	12,326	45.9[a]	37.1	36.1	26.3	33.9	59.5	614.2[a]
85 and Older		577	864	1,511	2,240	3,313	6,551		49.7	74.9	48.2	47.9	192.4	

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TABLE III

STATES WITH THE LARGEST POPULATION 60 YEARS OF AGE AND OLDER 1980

State	Total Population (In Thousands)	Population 60 Years of Age and Older (In Thousands)	Population 60 Years of Age and Older as Percentage of the Total Population
California	23,668	3,407	14.4
Florida	9,746	2,252	23.1
New York	17,558	3,003	17.1
Pennsylvania	11,864	2,164	18.2
United States	226,546	35,637	15.7

SOURCE: Bureau of the Census. Census of Population. General Characteristics of the Population, and Detailed Characteristics of the Population.

TABLE IV

YEARS OF SCHOOL COMPLETED
PERSONS 50 YEARS OF AGE AND OLDER

NEW YORK STATE
1960 TO 1980

Age	COMPLETED HIGH SCHOOL						COMPLETED FOUR YEARS OF COLLEGE					
	1960		1970		1980		1960		1970		1980	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
50 to 54	188,130	18.0%	361,204	34.1%	377,685	37.9%	46,338	4.4%	53,548	5.1%	74,478	7.5%
55 to 59	140,802	14.8	254,893	26.0	382,301	39.0	35,584	3.7	46,876	4.8	61,531	6.3
60 to 64	103,813	12.9	181,490	21.0	296,181	35.0	25,097	3.1	39,421	4.6	45,460	5.4
65 to 69	70,607	10.6	124,830	17.9	192,814	26.6	16,738	2.5	25,362	3.6	35,057	4.8
70 to 74	46,171	9.5	89,545	16.3	124,951	22.0	11,608	2.4	16,967	3.1	27,383	4.8
75 and Older	51,247	10.1	104,420	14.5	165,925	19.2	12,328	2.4	20,559	2.8	33,496	3.9
Total 60 Years of Age and Older	271,838	11.0	500,285	17.7	779,871	26.0	65,771	2.7	102,309	3.6	141,396	4.7

SOURCES: Bureau of the Census. Census of Population. Characteristics of the Population. Detailed Characteristics: Table 65-1950; Table 103-1960; Table 148-1970; and Table 205-1980.

TABLE V

MEDICARE PROGRAM[1]
RECIPIENTS, BENEFIT PAYMENTS AND AVERAGE HOSPITAL CHARGES,
65 YEARS OF AGE AND OLDER

UNITED STATES AND NEW YORK STATE
1978 - 1982

ITEM	UNITED STATES					NEW YORK STATE				
	1978	1979	1980	1981	1982	1978	1979	1980	1981	1982
Number of Medicare Recipients (Millions)										
Hospital Insurance	23.5	24.1	24.6	25.1	25.6	2.0	2.1	2.1	2.1	2.1
Supplementary Medical Insurance	23.3	23.9	24.5	25.0	25.5	2.0	2.1	2.1	2.1	2.1
Benefit Payments During Calendar Year										
Hospital Insurance Total (Millions)	$17,622.2	$20,551.9	$24,975.4	$30,242.2	$35,520.2	$1,814.3	$1,858.8	$2,347.4	$2,729.7	$3,084.1
Hospital Insurance - Aged - (Per Enrollee)	$ 664	$ 751	$ 893	$ 1,060	$ 1,222	$ 797	$ 807	$ 999	$1,155	$1,292
Supplementary Medical Insurance - Total (Millions)	$ 7,216.0	$ 8,666.0	$10,585.7	$13,055.0	$15,391.0	$ 776.3	$ 868.4	$1,062.0	$1,272.0	$1,478.6
Supplementary Medical Insurance - Aged (Per Enrollee)	$ 261	$ 304	$ 363	$ 439	$ 507	$ 329	$ 358	$ 435	$ 515	$ 599
Average Charges Per Day (Covered)										
Short-stay Hospitals - Aged	$ 226	$ 256	$ 296	$ 351	$ 419	$ 249	$ 274	$ 307	$ 343	$ 387
Skilled Nursing Facilities - Aged	$ 57	$ 64	$ 71	$ 81	$ 92	$ 68	$ 76	$ 83	$ 94	$ 103

1 Medicare is a Federal health insurance program for persons 65 and older and for some severely disabled persons under 65.

SOURCE: U. S. Department of Health and Human Services. Health Care Financing Administration. Medicare Program Statistics, Selected State Data, 1978-82.

TABLE VI

PER CAPITA OUT-OF-POCKET HEALTH CARE EXPENDITURES OF THE ELDERLY

UNITED STATES
1977 - 1990

	1977*	1981[A]	1985[A]	1990[A]
Direct Payments	$ 530	$ 885	$1,272	$1,904
Premiums				
Medicare, Part B	90	125	191	227
Private Health Insurance	78	144	220	264
Total	$ 698	$1,154	$1,683	$2,395
Percent of Mean Income	(12%)	(13%)	(16%)	(18%)

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* Fiscal year.

A Estimates by New York State Office for the Aging: assumptions include private health insurance costs rise after 1977 at the same rate as Medicare, Part B premium costs and that the mean income for the elderly will continue to rise after 1981 in the same relation to CPI increases as it did between 1976 and 1981.

SOURCE: New York State Office for the Aging. Medicare: Analysis and Recommendations for Reform, 1983, p. 13. The table is based on data from Gibson, R.M. and C.R. Fisher, "Age Differences in Health Care Spending, Fiscal Year 1977." Social Security Bulletin, January, 1979; Fisher, C.R., "Differences by Age Group in Health Care Spending", Health Care Financing Review, Spring, 1980; Freeland, M.S., and C.F. Schendler, "National Health Expenditure Growth in the 1980's", Health Care Financing Review, March, 1983; Background Material and Data on Major Programs Within the Jurisdiction of the Committee on Ways and Means, U.S. House Ways and Means Committee, February, 1983; income data were based on statistics from the Bureau of the Census and the President's Council of Economic Advisors.

TABLE VII

MEDIAN INCOME OF FAMILIES AND UNRELATED INDIVIDUALS IN CURRENT DOLLARS BY AGE

NEW YORK STATE
1977 - 1981

Age and Type of Household	1977	1979	1981
Families - Total	$ 16,136	$ 19,735	$ 20,655
Head Under 65	16,865	21,129	21,072
Head Aged 65 and Older	10,692	11,941	15,141
Unrelated Individuals - Total	$ 5,701	$ 7,623	$ 8,002
Under 65	8,366	10,183	10,268
Aged 65 and Older	3,712	5,222	4,935

SOURCE: New York State Office for the Aging. Status of the Elderly: Statistical Supplement to the Annual Report 1983-84, March, 1985, Table 23, p. 58.

TABLE VIII

PERCENT OF POPULATION WITH INCOME BELOW $4,000 FOR SELECTED CATEGORIES OF AGE, SEX AND ETHNICITY

NEW YORK STATE
1979

Category	Percent Below $4,000
All persons 15 years and older	27.9
All persons 60 years and older	34.1
White persons 60 years and older	32.3
Black persons 60 years and older	47.6
Spanish persons 60 years and older	56.8
Women 60 years and older	47.2
Persons of other races 60 years of age and older[a]	49.1

a Other races include American Indian, Eskimo, Aleut, Asian and Pacific Islander.

SOURCE: Bureau of the Census. 1980 Census of Population. Characteristics of the Population, Detailed Population Characteristics,,New York, Table 234, pp. 1129-1131.

TABLE IX

STATES WITH LARGEST NUMBER OF PERSONS AGED 65 AND OLDER WITH INCOME BELOW POVERTY LEVEL

1980

1.	Texas	272,189
2.	New York	235,830
3.	Florida	209,330
4.	California	188,618
5.	Pennsylvania	172,875
6.	Illinois	140,985
7.	Ohio	139,410
8.	North Carolina	137,237
9.	Georgia	125,598
10.	Tennessee	123,928
	United States	3,581,729

SOURCE: Bureau of the Census. 1980 Census of Population, Characteristics of the Population, General, Social and Economic Characteristics, Table 72.

TABLE X

PERSONS AGED 65 AND OLDER
WITH INCOME BELOW POVERTY LEVEL

NEW YORK STATE
1979

Age	Population For Whom Poverty Level Has Been Determined	Income Below Poverty Level	
		Number	Percent
65 Years of age and older	2,034,159	235,830	11.6%
65 to 69	713,993	69,003	9.7
70 Years of age and older	1,320,166	166,827	12.6
70 to 74	551,929	59,039	10.7
74 and older	768,237	107,788	14.0

SOURCE: Bureau of the Census. 1980 Census of Population. Characteristics of the Population. Detailed Population Characteristics. New York State, Table 245, p. 1444.

TABLE XI
INDICIES OF MEDICAL CARE PRICES
UNITED STATES
1970 - 1984

Year	Index, Total	Medical Care Services					Medical Care Commodities[b]	Avg. Annual % Change Total Medical Care Services
		Total[a]	Professional Services			Hospital Room		
			Total[a]	Physicians	Dental			
1970	120.6	124.2	119.7	121.4	119.4	145.4	103.6	7.1[c]
1971	128.4	133.3	127.5	129.8	127.0	163.1	105.4	7.3
1972	132.5	138.2	132.1	133.8	132.3	173.9	105.6	3.7
1973	137.7	144.3	136.4	138.2	136.4	182.1	105.9	4.4
1974	150.5	159.1	148.2	150.9	146.8	201.5	109.6	10.3
1975	168.6	179.1	164.5	169.4	161.9	236.1	118.8	12.6
1976	184.7	197.1	179.4	188.5	172.2	268.6	126.0	10.1
1977	202.4	216.7	194.1	206.0	185.1	299.5	134.1	9.9
1978	219.4	235.4	208.8	223.1	198.1	332.4	143.5	8.6
1979	239.7	258.3	226.8	243.6	214.8	370.3	153.8	9.7
1980	265.9	287.4	252.0	269.3	240.2	418.9	168.1	11.3
1981	294.5	318.2	277.9	299.0	263.3	481.1	186.5	10.7
1982	328.7	356.0	301.5	327.1	283.6	556.7	205.7	11.9
1983	357.3	387.0	323.0	352.3	302.7	619.7	223.3	8.7
1984, June	378.0	408.4	345.8	377.1	326.2	662.0	238.7	6.2[d]

a Includes other services not shown separately.
b Prior to 1978, covers drugs and prescriptions only.
c Change from 1969.
d Percent change from June 1983 - June 1984.

SOURCE: U.S. Bureau of Labor Statistics, Consumer Price Indexes for Selected Items and Groups.

APPENDIX B

Sample of Ongoing Programs for the Elderly

I. PROFESSIONAL EDUCATION PROGRAMS

1. **Professional Courses:** include gerontology, multidisciplinary gerontological studies, gerontological counseling, human relations, and aging services.
2. **Regents Competency Examination (RCE):** the RCE in gerontology tests for knowledge and understanding of the biological, psychological, and social aspects of aging. The RCE in nursing tests for knowledge and skills in the process and care for the elderly, as it pertains to hospitals and nursing homes.
3. **Geriatric Resource Centers:** (see Appendix C).

II. PARAPROFESSIONAL AND INFORMAL EDUCATION

A. Elementary and Secondary Schools and Postsecondary Institutions

1. **Health Aide Training Programs:** aides provide direct health care services for the elderly. These programs are provided in many school districts, BOCES and community colleges through the Vocational Education Act and other Federal and State funding.
2. **Curriculum Development:**
   a. The "Practical Help for Those Caring for an Elderly Person," developed by the State Office for the Aging, in cooperation with the State Education Department, is a "how to" guide to strengthen the ability of individuals to provide informal care for the elderly. This initiative was cited in the Governor's 1984 State of the State Message.
   b. State Education Department program staff work with the State Office for the Aging to portray the elderly in various curricula more accurately, e.g., Home Economics, Introduction to Careers, and Social Studies, initiated by the Regents Action Plan for Elementary and Secondary Education.
3. **Altering Societal Perceptions:** projects in which the elderly serve in useful capacities, demonstrate active lifestyles or pursue lifelong learning opportunities, have the effect of altering societal perceptions.

B. Postsecondary Institutions

Associate in Applied Science (AAS) and Certificate Programs in Gerontology: such certificate programs are available on a statewide basis.

III. USE OF THE ELDERLY AS COMMUNITY RESOURCES

A. Elementary and Secondary Schools

1. **Mentor Programs:** making use of the services of talented elderly individuals as mentors for high school students. The program is being implemented in various school districts statewide, i.e., Herricks Central School District, Sweet Home Central School District, and New York City Community School District #2.

2. **Retired Executives and Professionals Academies:** tapping the expertise of retired corporate executives and other professionals and to provide intellectual stimulation for well-educated elderly. A number of school districts, e.g., Great Neck, have such programs.
3. **Intergenerational Activities:** intergenerational bands or choruses are sponsored in school districts on Long Island and New York City. Other activities include an intergenerational computer course, and "student/senior recreational afternoons," where the elderly join with students in recreational activities, including special student presentations for the elderly.
4. **Volunteer Tutor Programs:** retired teachers serve as tutors and role models for hard-to-serve students. The program has been particularly successful in the Park West High School in New York City.
5. **Literacy Volunteers of New York State:** enrolls the elderly to tutor undereducated adults in informal settings and in learning centers operated by schools and colleges.

IV. EDUCATION FOR THE ELDERLY

A. Elementary and Secondary Schools

1. **Tuition Exemption Programs:** nearly all school districts which operate continuing education programs have special arrangements for the elderly ranging from free or reduced tuition to special programs specifically for elderly individuals, often delivered on site – in housing or centers for the elderly.
2. **Special Programs:** school district programs which combine educational, social, health maintenance, and financial programs for the elderly. Greece Central School District operates a community center where the Town of Greece's Senior Citizen Services staff provides health and housing services and the school district provides educational programs. Also, New York City Public School 225 in Brighton Beach cooperates with a variety of agencies and organizations which serve the elderly in the community, including a nearby senior citizen center, to expand access to services to elderly shut-ins. Adult programs for the elderly at Public School 225 are offered five days a week, ranging from nutrition classes and aerobics to English-as-a-Second Language, GED, and stenography and typing classes.
3. **Secondary School Courses:** districts in suburban areas are enrolling the elderly in secondary school courses.

B. Postsecondary Institutions

1. **Adult Privileges and Tuition Waivers:** allowing the elderly to audit courses, free on a space available basis, at the City and State Universities of New York. Also, tuition waivers have been authorized in more than a dozen community colleges across the State for individuals 65 years of age or older.
2. **The Regents College Degree Program:** affording the elderly the opportunity to earn the degree which they could not earn during their working lives.
3. **Needs-Specific Programs:** courses for the elderly in household budgeting, shopping and food preparation, and how to gain access to community services. New York City Technical College offers these courses both on- and off-campus.

C. **Vocational Rehabilitation Services**

Meeting the Needs of the Older Worker: the agency "Aging in America" has developed programs to train vocational rehabilitation staff in meeting the needs of the older worker. "Aging in America" is working with State vocational rehabilitation staff in New York City, Albany, Binghamton, Buffalo, Poughkeepsie and Utica to improve their skills in addressing these needs.

V. USING OTHER RESOURCES OF EDUCATIONAL INSTITUTIONS TO SERVE THE ELDERLY

A. **Elementary and Secondary Education**

1. **Lunch Programs:** many schools, such as Junior High School 67 in Queens, use their facilities to provide lunch for the elderly.
2. **Excess School Space:** provides nutritional, recreational, educational and social programs and services for the elderly. Some school districts, e.g., Bethpage, sponsor clubs for the elderly which meet weekly in the school. Bus transportation is provided by the districts as part of this service. Other school districts provide services for the elderly such as health, recreation, hot lunches, enrichment activities and support services. Herricks School District, in particular, provides these services for 400 of its older residents through the district's Community Service Center. This Center is funded by $60,000 in grants from the Nassau County Department of Senior Citizen Affairs and the town of North Hempstead.
3. **Transportation:** public school transportation is sometimes used to enable the elderly to attend special events at schools in some school districts.
4. **Gold Cards:** offers the elderly free tuition to adult courses and discounts of 10 percent or more from over 100 local businesses and organizations. This program is a cooperative venture of the Elmira Chamber of Commerce and the Central School District.
5. **PreRetirement Counseling:** offered through school districts in cooperation with local offices for the aging. For example, a preretirement counseling program is offered by the Great Neck School District in cooperation with the County Office of Senior Citizen Affairs.

B. **Postsecondary Institutions**

1. **Displaced Worker Programs:** offering job placement and occupational retraining services for older workers. Such programs are offered at Genesee Community College and Erie Community College. Also, York College of the City University of New York uses JTPA funds to prepare older workers for specific positions in food service companies.
2. **Vocational Education Act Older Worker Focus:** postsecondary institutions are beginning to respond to the new Carl Perkins Vocational Education Act's encouragement to serve "adults in need of training or retraining, including older workers who require new skills to remain employable."
3. **Community Service Programs:** students often serve as companions or provide other services for the elderly as part of community service programs at colleges and universities.

C. **Libraries and Museums**

1. **Services to the Aging (SAGE) Program:** one of the largest library programs serving the elderly in the United States. SAGE, located at the Brooklyn Public Library, is a multi-faceted senior information and referral service specializing in library services to the elderly. The program has been in existence for 11 years. Services include adult independent learning opportunities, information and referral, concerts, book talks, poetry readings, large print material, bifocal kits, and materials and equipment for the elderly who are deaf and visually handicapped.
2. **Part-time Jobs:** the Brooklyn Public Library hires elderly individuals to work with elderly library users.
3. **Adult Learning/Job Information Centers:** thirteen New York State libraries receive Federal funds to provide counseling and information services to individuals seeking employment, including the elderly.
4. **Radio Reading:** the Ramapo-Catskill and Chautauqua-Cattaraugus libraries use special broadcast channels to have newspapers and other material read aloud to home-bound elderly. The necessary receivers are provided free of charge by the libraries.
5. **Home-bound Services:** most public libraries provide reading materials to the home-bound elderly through bookmobiles, books by mail, and home delivery.
6. **Literacy Programs for the Elderly:** the Buffalo and Erie County Library is preparing to begin a literacy program in conjunction with WNED in Buffalo that includes airing training programs for literacy volunteers over the public broadcasting station.
7. **Senior Information Centers:** the Lockport Library in Niagara County will be establishing a Center in 1986.

APPENDIX C

Members of the Senior Advocacy Organizations

ADULT DAY SERVICES ASSOC. INC.
Lockport Senior Citizens Center
57 Richmond Avenue
Lockport, NY 14049
(716) 433-8700

AMERICAN ASSOCIATION OF RETIRED PERSONS
77 Fulton Street, Apt. 19K
New York, NY 10038
(212) 571-7679
(Louis Krieger, Chairman)

AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES
AFL-CIO, Dist. Council 37
125 Barclay Street
New York, NY 10007
(212) 815-1681
(Eleanor Litwak)

AMERICAN RED CROSS
Hackett Boulevard
Albany, NY 12208
(518) 462-7461
(Robert Ragsdale, State Relations Representative and Eleanor Litwak)

ASSOCIATION OF AREA AGENCIES ON AGING
Madison County Office for Aging
Box 250, Rte. 20
Morrisville, NY 13408
(315) 684-9424
(Margaret Williams)

ASSOCIATION OF AREA AGENCIES ON AGING
Metropolitan Commission on Aging
Syracuse, NY 13202
(315) 425-2362
(Roslyn Bilford)

ASSOCIATION OF AREA AGENCIES ON AGING
Rensselaer County Department for the Aging
1700 7th Avenue
Troy, NY 12180
(518) 270-2730
(Susan Baird)

BROOKDALE FOUNDATION
126 East 56th Street
New York, NY 10020
(212) 644-0774
(Estelle Greenberg, Vice President)

BUCK CONSULTANTS
2 Penn Plaza
New York, NY 10121
(212) 279-4400 Ext. 113
(William Arnone)

CHINATOWN PLANNING COUNCIL
115 Chrystie Street, Lower Fl.
New York, NY 10002
(212) 431-9026
(Po Ling Ng)

CITYWIDE ADVOCATES
39-65 47th Street
Long Island City, NY 11104
(212) 392-2312
(Rose Kryzak)

CIVIL SERVICE EMPLOYEES ASSOCIATION
143 Washington Avenue
Albany, New York 12207
(518) 434-0191
(Leo Hope, Director)

Members of the Senior Advocacy Organizations
(Continued)

CIVIL SERVICE EMPLOYEES ASSOCIATION, RETIREE DIVISION
143 Washington Avenue
Albany, NY 12210
(518) 434-0191
(Julia Hope)

COALITION OF CONCERNED FOR OLDER AMERICANS
226 East 25th Street
New York, NY 10010
(212) 696-5501
(Leora Magier)

COMMITTEE ON OLDER PERSONS
NYC Chapter, National Association of Social Workers
545 8th Avenue
New York, NY 10018
(212) 947-5000
(Barbara Reinhart)

COMMUNITY COUNCIL OF GREATER NY
75 East End Avenue, Apt. 5J
New York, NY 10028
(212) 737-8328
(Jean Janover)

CONGRESS OF SENIOR CITIZENS OF GREATER NEW YORK
628 West 151st Street
New York, NY 10031
(212) 673-5120
(Albert Blumberg)

COUNCIL OF SENIOR CITIZENS AND SERVICES
275 7th Avenue
12th Floor
New York, NY 10001
(212) 989-6200 (Barbara Karro)

FEDERATION OF JEWISH PHILANTHROPIES
130 East 59th Street
New York, NY 10022
(212) 980-1000
(Zippora Twerski)

FEDERATION OF PROTESTANT WELFARE AGENCIES
281 Park Avenue South
New York, NY 10010
(212) 777-4800
(Daniel Sambol)

GOVERNOR'S ADVISORY COMMITTEE
486 Bedford Road
Armonk, NY 10504
(914) 273-3326
(Robert L. Popper)

GREATER NEW YORK FUND/UNITED WAY
99 Park Avenue
New York, NY 10016
(212) 557-1050 Ext. 21
(Livingston Francis)

INSTITUTE FOR PUERTO RICAN/HISPANIC ELDERLY
105 East 22nd Street, Room 401
New York, NY 10010
(212) 677-4181
(Suleika Cabrera)

INTERNATIONAL LADIES GARMENT WORKERS UNION
275 7th Avenue
New York, NY 10001
(212) 807-0730
(Matthew Schoenwald, Director, Retiree Service Department)

JAMAICA SERVICES PROGRAM FOR ADULTS
174-27 128th Avenue
Jamaica, NY 11434
(718) 276-3852
(Milton Webber)

JEWISH INSTITUTE FOR GERIATRIC CARE
271-11 76th Avenue
New Hyde Park, NY 11042
(516) 437-0090
(David Glasser, Executive Vice-President)

Members of the Senior Advocacy Organizations
(Continued)

JOINT PUBLIC AFFAIRS COMMITTEE FOR OLDER ADULTS
40 W. 68th Street
New York, NY 10023
(212) 724-3200
(Judith Duhl, Director)

NATIONAL CAUCUS OF BLACK AGED
932 East 49th Street
Brooklyn, NY 11203
(212) 585-0233
(Earl Webber)

NYC DEPARTMENT FOR THE AGING
2 Lafayette Street
New York, NY 10007
(212) 577-0827
(Robert Spohn)

NEW YORK GRAY PANTHERS
15 West 65th Street
New York, NY 10023
(212) 799-7572
(Lillian Sarro)

NEW YORK STATE ASSOCIATION OF GERONTOLOGICAL EDUCATORS
Utica College
Burrstone Road
Utica, NY 13502
(Ronald Lucchino, President)

NYS COALITION OF CONCERNED FOR OLDER AMERICANS
226 East 25th Street
New York, NY 10010
(212) 696-5501
(Lowell Iberg, Chairman)

NYS CONFERENCE ON AGING
124 Franklin Place
Woodmere, NY 11598
(516) 374-4747
(Celeste Fried, President)

NYS COUNCIL OF CATHOLIC CHARITIES
11 North Pearl Street
Albany, NY 12207
(518) 434-3482
(Jack Bolinsky, Executive Secretary)

NYS COUNCIL OF SENIOR CITIZENS
3 Washington Square Village
New York, NY 10012
(212) 475-8296
(201) 272-5913
(Ed Gray, Chairman)

NYS LEGISLATIVE COMMITTEE OF AMERICAN ASSOCIATION OF RETIRED PERSONS
33 Davis Avenue
Albany, NY 12203
(518) 489-7184
(James T. Hepinstall, Secretary)

NYS RETIRED TEACHERS ASSOCIATION
150 State Street
Albany, NY 12210
(518) 462-0715
(Irma Miesinheimer, President)

NYS UNITED TEACHERS
59 Wolf Road
Box 15-008
Albany, NY 12212
(518) 459-5400 Ext. 291
(Tema Bellinson)

OLDER AMERICANS ACT ADVISORY COMMITTEE
RD #1
Cato, NY 13033
(315) 626-6457
(Francis Benton)

OLDER WOMEN'S LEAGUE
121 Madison Avenue
New York, NY 10016
(212) 689-0809
(Ruby Benjamin)

Members of the Senior Advocacy Organizations
(Continued)

PUBLIC EMPLOYEES FEDERATION, TEACHER RETIREE DIVISION
74 Trinity Place, 13th Floor
New York, NY 10006
(212) 227-3132
(Bill Ginsberg)

RETIRED PUBLIC EMPLOYEES ASSOCIATION, INC.
1873 Western Avenue
Albany, NY 12203
(518) 869-2542
(Sidney Smerznak, Executive Director)

SAVE OUR SECURITY
Rte. #1, Box 430
Pine Plains, NY 12567
(518) 398-7207
(John Moore, Executive Vice President)

SENIORS FOR ADEQUATE SOCIAL SECURITY
70 West 95th Street
New York, NY 10025
(212) 666-1270
(Max Manes)

SENIOR SERVICE CENTERS OF THE ALBANY AREA, INC.
25 Delaware Avenue
P.O. Box 9076
Albany, NY 12210
(Albert Abrams)

STATEWIDE SENIOR ACTION COUNCIL
196 Morton Avenue
Albany, New York 12202
(518) 436-1006
(Michael Burgess, Executive Director)

STATE COMMUNITIES AID ASSOCIATION
151 Chestnut Street
Albany, NY 12210
(518) 463-1896
(Jane Murgo and Albert Abrams)

TEAMSTERS LOCAL 237 - RETIREMENT DIVISION
216 West 14th Street
New York, NY 10011
(212) 807-0555
(Maggie Drezin, Director)

UNITED FFDERATION OF TEACHERS
260 Park Avenue South
New York, NY 10010
(212) 777-7500
(Mel Aaronson)

VACATIONS & SENIOR CENTERS ASSOCIATION INC.
67 Irving Place
New York, NY 10009
(212) 460-0077

VISITING NURSE SERVICE OF NEW YORK
107 East 70th Street
New York, NY 10021
(212) 319-8889
(Irma Schecter, Director of Government Affairs)

Selected Programs in Geriatrics/Gerontology and Related Fields

ADELPHI UNIVERSITY
Multidisciplinary Center on Aging
South Avenue
Garden City, NY 11530

ALBANY MEDICAL COLLEGE
Section of Geriatric Medicine
47 New Scotland Avenue
Albany, NY 12208

ALBERT EINSTEIN COLLEGE OF MEDICINE
Programs in Geriatrics/Gerontology
1300 Morris Park Avenue
Bronx, NY 10461

ALFRED UNIVERSITY
Undergraduate Gerontology Program
Alfred, NY 14802

CANISIUS COLLEGE
Gerontology Training Programs
2001 Main Street
Buffalo, NY 14208

COLUMBIA UNIVERSITY

Brookdale Institute on Aging and Human Development
622 West 113th Street - Room 803
New York, NY 10027

Center for Geriatrics and Gerontology
100 Haven Avenue
New York, NY 10032

CORNELL UNIVERSITY MEDICAL COLLEGE
Department of Medicine
Division of Geriatrics and Gerontology
1300 York Avenue
New York, NY 10021

HUNTER COLLEGE
Brookdale Center for the Aging
425 East 25th Street
New York, NY 10010

MOLLOY COLLEGE
Gerontology Department and the Institute of Gerontology
100 Hempstead Avenue
Rockville Center, NY 11570

MOUNT SINAI SCHOOL OF MEDICINE
Department of Geriatrics and Adult Development
One Gustave L. Levy Place
New York, NY 10029

NEW YORK COLLEGE OF OSTEOPATHIC MEDICINE
Department of Clinical Sciences
Old Westbury, NY 11568

NEW YORK MEDICAL COLLEGE

The Center for Aging and Adult Development
Munger Pavilion, Room 170
Valhalla, NY 10595

Department of Medicine
Division of Gerontology and Geriatric Medicine
Valhalla, NY 10598

NEW YORK UNIVERSITY COLLEGE OF MEDICINE

Bellevue Medical Center's Geriatrics/Gerontology Program
NYU Medical Center
550 First Avenue
New York, NY 10016

NORTH COUNTRY COMMUNITY COLLEGE
Center for Human Development
20 Winona Avenue
Saranac Lake, NY 12983

Selected Programs in Geriatrics/Gerontology and Related Fields
(Continued)

FORDHAM UNIVERSITY
Third Age Gerontology Center
113 West 60th Street
New York, NY 10023

SUC at CORTLAND
Department of Sociology/Anthropology
Cortland, NY 13045

SUNY at ALBANY
Ringel Institute of Gerontology
Rockefeller College of Public Affairs and Policy
135 Western Avenue
Albany, NY 12222

SUNY HEALTH SCIENCE CENTER at BROOKLYN
Department of Medicine
Division of Medical Geriatrics
450 Clarkson Avenue
Box 50
Brooklyn, NY 11203-2098

SUNY at BUFFALO SCHOOL OF MEDICINE
Western New York Geriatric Education Center
Beck Hall
3435 Main Street
Buffalo, NY 14214

SUNY at STONY BROOK
Jewish Institute for Geriatric Care
271-11 76th Avenue
New Hyde Park, NY 11042

SYRACUSE UNIVERSITY
School of Social Work
Gerontology Center
Syracuse, NY 13210

ST. JOHN FISHER COLLEGE
Department of Gerontology
3690 East Avenue
Rochester, NY 14618

SUNY HEALTH SCIENCE CENTER at SYRACUSE and CLINICAL CAMPUS at BINGHAMTON

SUNY Health Science Center at Syracuse
Program in Geriatrics
705 East Adams Street
Syracuse, NY 13210

SUNY Health Science Center
Clinical Campus at Binghamton
Wilson Hospital
33 Harrison Street
Johnson City, NY 13790

UNIVERSITY OF ROCHESTER SCHOOL OF MEDICINE AND DENTISTRY
Center on Aging
Rochester, NY 14642

UPSTATE MEDICAL CENTER
Program in Geriatrics
Syracuse, NY 13210

UTICA COLLEGE OF SYRACUSE UNIVERSITY
Institute of Gerontology
Burrstone Road
Utica, NY 13502

New York State Area Agencies on Aging*

AREA AGENCY	TELEPHONE
Albany County Department for the Aging	518 447-7180
Allegany County Office for the Aging	716 268-7691 or 7692
Broome County Office for the Aging	607 772-2411
Cattaraugus County Department for the Aging	716 375-4114
Cayuga County Office for the Aging	315 253-1226
Chautauqua County Office for the Aging	716 753-4417
Chemung County Office for the Aging	607 737-5520
Chenango County Area Agency on Aging	607 355-4624
Clinton County Office for the Aging	518 561-4620
Columbia County Office for the Aging	518 828-4258
Cortland County Office for the Aging	607 753-5060
Delaware County Office for the Aging	607 746-6333
Dutchess County Office for the Aging	914 431-2465
Erie County Department of Senior Services	716 846-8522
Essex County Office for the Aging	518 873-6301 Ext. 370
Franklin County Office for the Aging	518 483-6767
Fulton County Office for the Aging	518 762-8288
Genesee County Office for the Aging	716 343-1611
Greene County Office for the Aging	518 943-5332
Herkimer County Office for the Aging	315 867-1121
Jefferson County Office for the Aging	315 782-9100 Ext. 3191
Lewis County Office for the Aging	315 376-7553
Livingston County Office for the Aging	716 658-2881 Ext. 18, 29
Madison County Office for the Aging	315 684-9424
Monroe County Office for the Aging	716 442-6350
Montgomery Countywide Office for the Aging	518 843-2300
Nassau County Dept. of Senior Citizens Affairs	516 535-5990
Niagara County Office for the Aging	716 439-6044
Oneida County Office for the Aging	315 798-5771
Metropolitan Commission on Aging (Onondaga)	315 424-2362
Ontario County Office for the Aging	716 394-7070 Ext. 2240
Orange County Office for the Aging	914 294-8801 Ext. 283-286
Orleans County Office for the Aging	716 589-5673 Ext. 191
Oswego County Office for the Aging	315 349-3231
Otsego County Office for the Aging	607 547-4233
Putnam County Office for the Aging	914 225-1034
Rensselaer County Department for the Aging	518 270-2730
Rockland County Office for the Aging	914 354-0200 Ext. 2100
St. Lawrence County Office for the Aging	315 379-2204
Saratoga County Office for the Aging	518 885-5381 Ext. 270
Schenectady County Office for the Aging	518 382-8481
Schoharie County Office for the Aging	518 234-4219
Schuyler County Office for the Aging	607 535-7108
Seneca County Office for the Aging	315 568-5893
Steuben County County Office for the Aging	607 776-3359
Suffolk County Office for the Aging	516 348-5315
Sullivan County Office for the Aging	914 794-3000

* Listing provided by the New York State Office for the Aging

New York State Area Agencies on Aging*
(Continued)

AREA AGENCY	TELEPHONE
Tioga County Office for the Aging	607 687-4120
Tompkins County Office for the Aging	607 274-5427
Ulster County Office for the Aging	914 331-9300 Ext. 578
Warren/Hamilton Counties Office for the Aging	518 761-6347
Washington County Office for the Aging	518 499-2468
Wayne County Office for the Aging	315 946-4163
Westchester County Office for the Aging	914 682-3000
Wyoming County Office for the Aging	716 786-3144
Yates County Office Area Agency on Aging	315 536-2368
New York City Department for the Aging	212 577-0848
St. Regis Mohawk Office for the Aging	518 358-2272 Ext. 221
Seneca Nation of Indians – Office for the Aging	716 532-5777

* Listing provided by the New York State Office for the Aging.

APPENDIX D

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